



## Acknowledgement of Receipt of Notice

Sierra Eye Medical Group, Inc. (SEMG) &  
Sierra Ambulatory Surgery Center, A Medical Corporation (SASC)  
2828 - 2830 W. Main St., Visalia, CA 93291-4300

### Privacy Officials:

Deborah Navarrette Phone (559)636-1000 ext.225

Rita Gomez Phone (559) 734-7272

I hereby acknowledge that I received a copy of this medical practice's Notice of Privacy Practices

**The most current Notice of Privacy Practices is on our website [www.sierraeyegroup.com](http://www.sierraeyegroup.com)**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Account # \_\_\_\_\_

If not signed by the patient, please indicate your relationship to the patient:

- parent or guardian of minor patient
- guardian or conservator of an incompetent patient
- beneficiary or personal representative of deceased patient

Name of Patient: \_\_\_\_\_

Account # \_\_\_\_\_

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### ***For Office Use Only:***

Signed form received by: \_\_\_\_\_

Acknowledgment refused:

Efforts to obtain:

\_\_\_\_\_  
\_\_\_\_\_

Reasons for refusal:

\_\_\_\_\_  
\_\_\_\_\_